TOWN OF UXBRIDGE Board of Selectmen 21 S Main Street Uxbridge, MA 01569 508.278.8600, Ext. 7

License Checklist: Storage of Flammable, Combustible & Explosive Materials:

MGL Chapter 148, §13 & 9

Name of Applicant: _____ Address:____

thos Sele hear exer reco 1	ense for the storage of flammable or combustible fluids in quantities in excess of allowed by regulation is granted by the local licensing authority (Board of ctmen) after approval or disapproval by the Fire Chief, and after a public ing. A license is not owned by an individual as a personal privilege. A license once cise, is a grant which runs with the land. A permanent record of a license is to be reded and maintained by the Town Clerk. Receive approval/disapproval by the Fire Chief and Granting of the License by the Board of Selectmen and Obtain Certificate of Registration from the Town Clerk within 3 weeks of Board of Selectmen approval.
	New License
	Submit an Application for License Form FP-002A to the Selectmen's Office, as the Local Licensing Authority, for approval/disapproval by the Fire Chief. Check the "New License" box.
	Whether the Fire Chief approves or disapproves the application, a public hearing is scheduled through the Selectmen's Office. Public Hearing must be advertised in a local newspaper, not less than seven days prior to the hearing, at the applicant's expense and notices sent to Abutters. Selectmen's Office will post in the newspaper and Applicant will be invoiced.
	Plot Plan – Provide a plot plan showing the lot lines of all abutters, building(s) on the property and depicting the location of the storage proposed. PLEASE NOTE DISTANCES, FROM ALL SIDES, OF THE PROPOSED STORAGE TO BUILDINGS AND LOT LINES.
	Obtain a List of Certified Abutters from the Assessor's Office
	The cost for the license is:payable to the Town of Uxbridge. The applicant is also responsible for the cost of the Legal Ad and certified mailing cost for the Abutters letters. The cost of the ad and mailing will be provided prior to the hearing and must be paid in full prior to the hearing. The mailing to the Abutters will occur not less than seven days prior to the hearing.

Background Check. Applicant should submit a CORI and present in-person with a valid state id.
Input from Town Departments. The application and supporting documentation will be forwarded to the Uxbridge Fire Dept., Board of Health, Building Inspector, Police, DPW, Conservation Agent, Treasurer/Collector, and Director of Planning/Economic Development for any required inspections of the premises and/or endorsement. Board of Selectmen's Office to handle.

Certificate of Registration

A <u>Certificate of Registration</u> is the vehicle used by the license holder or occupant of licensed land to notify the Town Clerk annually, before April 30th, that a license is in use and currently being exercised. If a registration is not applied for and issued, after three weeks, it may be viewed as cessation and cause for review of the license. A registration must be plainly posted on the premises. Please contact the Town Clerk's Office for more information.

Permit

A <u>permit</u> from the Fire Chief is required in addition to a license for the storage of materials regulated under 527 CRM 14.00 (Flammable or Combustible Liquids, Flammable Solids or Flammable Gases).

The Selectmen will open the Public Hearing and take input from the Public. Upon Completion of the Hearing, the Board will vote to take appropriate action based on the information provided. The Applicant is expected to attend the Public Hearing.

The License (FP002) will be ready for pickup roughly 5 days after the Public Hearing. Please call the office to confirm. If approved, the *license must be plainly posted on the premises*.

Amending a License:

If the conditions, capacities or restrictions authorized by a license are changed, an amended license must be obtained. Submit a new **Application for License** to the Selectmen's Office, as the Local Licensing Authority, for approval/disapproval by the Fire Chief. Check the "Amended License" box and follow the same steps for as the New License.



The	Commo	nwealth	of Max	ssachusetts
Co	ity/Town	r of		-

Application For License

Massachusetts General Law, Chapter 148 §13

☐ New License ☐ Amended Lice

GIS Coordinates
LAT.
LINI,
LONG.
License Number

Application is hereby made store flamr	In accordance with the particles, combustibles or	provisions of Chapter 148 of t r explosives on land in buildin	the General Laws of l gs or structures here	Massachusetts for a license in described.
		d Assessor's Map and Parcel ID		
Attach a plot plan of the pi	operty indicating the lo	ocation of property lines and a	all buildings or struct	tures.
Owner of Land:				William Control of the Control of th
Address of Land Owner: _			•	
Use and Occupancy of Bui	Idings and Structures:_			d at the first state.
If this is an application for	amendment of an exist	ing license, indicate date of o	original license and a	ny subsequent amendments
		ch a copy of the current license		
Complete this section for the s Attach additional pages if need PRODUCT NAME	ded. All tanks and conto	ainers are considered full for MAXIMUM QUANTITY	the purposes of licer UNITS gal., lbs, Cubic feet	container UST, AST, IBC, drums
				to the state of th
Total quantity of all flar Total quantity of all con		be stored:		

Total quantity of all flammable solids to be stored:

LP-gas (Complete this section for the storage of LP-go	
Indicate the maximum quantity of LP-gas to (See 527 CMR 1.00 Table 1.12.8.50) Maximum quantity (in gallons) of LP-gas to be seen to	be stored and the sizes and capacities of all storage containers. stored in aboveground containers:
List sizes and capacities of all aboveground conta	iners used for storage:
Maximum quantity (in gallons) of LP-gas to be	stored in underground containers:iners used for storage:
Total aggregate quantity of all LP-gas to be stored:	
Fireworks (Complete this section for the storage of fire	eworks)
	d maximum quantity of each class. (See 527 CMR 1.00 Table 1.12.8.50
❖ Maximum amount (in pounds) of Class 1.4G:	•
* Maximum amount (in pounds) of Class 1.4: Total aggregate quantity of all classes of fireworks.	Type/class of magazine used for storage:
Explosives (Complete this section for the storage of ex	maximum quantity of each class. (See 527 CMR 1.00 Table 1.12.8.50)
Indicate classes of explosive to be stored and	maximum quantity of each olds. (See 32) Chart 100 1300 1
❖ Maximum amount (in pounds) of Class 1.1:	
Maximum amount (in pounds) of Class 1.2:	•
Maximum amount (in pounds) of Class 1.3:	
Maximum amount (in pounds) of Class 1.4:	Number of magazines used for storage:
Maximum amount (in pounds) of Class 1.5:	
Maximum amount (in pounds) of Class 1.6:	Number of magazines used for storage:
the information contained herein is accurate and con all materials stored pursuant to any license granted h	st that I am authorized to make this application. I acknowledge that appliet to the best of my knowledge and belief. I acknowledge that applied the stored or kept in accordance with all applicable limited to Massachusetts Chapter 148, and the Massachusetts Fire the storage of any material specified in any license granted specified by the license.
SignatureDate	Name
Fire Department Use Only	Fire Department and over this application with my
I,, Head of the	Fire Department endorse this application with my
Approvat a Disapprovat	
Signature of Head of the Fire Department	Date
Recommendations:	



THE COMMONWEALTH OF MASSACHUSETTS **EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY**

Department of Criminal Justice Information Services
200 Arlington Street, Sulte 2200, Chelsea, MA 02150
TEL: 617-660-4640 | TTY: 617-660-4606 | FAX: 617-660-5973
MASS.GOV/CJIS



Criminal Offender Record Information (CORI) Acknowledgement Form

Town of Uxbridg	<u>e</u> is reg	istered under the
(Organization)	•	•
provisions of M.G.L. c.6, § 172 to receive CORI for the puemployees, subcontractors, volunteers, license applican housing.	rpose of screening current and otherwise quates, current licensees, and applicants for the	alifled prospective rental or lease o
As a prospective or current employee, subcontractor, vo rental or lease of housing, I understand that a CORI chechereby acknowledge and provide permission to	k will be submitted for my personal informat	r applicant for the localis.
•	(Organization)	
to submit a CORI check for my information to the DCJIS signature. I may withdraw this authorization at any time I	i. This authorization is valid for one year from year from Yown of Uxbrid	m the date of my lge
	(Organization)	
with written notice of my intent to withdraw consent to a	CORI check.	
FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPO	SES ONLY:	
The Town of Uxb	ridgen	nay conduct
(Organization)		
subsequent CORI checks within one year of the date this Town of Uxbridge		hat : first provide me
(Organization)		
with written notice of this check.	· · ·	
By signing below, I provide my consent to a CORI chec Acknowledgement Form is true and accurate.	k and affirm that the Information provided	on Page 2 of thi
Signature of CORI Subject	Date)



THE COMMONWEALTH OF MASSACHUSETTS **EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY**

Department of Criminal Justice Information Services

200 Arlington Street, Suite 2200, Chelsea, MA 02150 TEL: 617-660-4640 | TTY: 617-660-4606 | FAX: 617-660-5973 MASS.GOV/CJIS

SUBJECT INFORMATION



Date

Please complete this section using the information of the person whose CORI you are requesting. The fields marked with an asterisk (*) are required fields, * First Name: _____ Middle Initial: _____ Suffix (Jr., Sr., etc.): _____ * Last Name:___ Former Last Name 1: Former Last Name 2: Former Last Name 3: Former Last Name 4: * Date of Birth (MM/DD/YYYY): _____ Place of Birth: _____ * Last SIX digits of Social Security Number: ___ -- __ _ _ _ _ _ _ \square No Social Security Number Sex: ______ Height: ____ ft. ____ in. Eye Color: _____ Race: _____ Driver's License or ID Number: _____ State of Issue: _____ Father's Full Name: Mother's Full Name: _____ Current Address * Street Address: Apt. # or Suite: *State: *State: SUBJECT VERIFICATION. The above information was verified by reviewing the following form(s) of government-issued identification: Verified by: Print Name of Verifying Employee

Signature of Verifying Employee

Departmental Approval License for Storage of Flammable, Combustible & Explosive Materials:

Departments - Please see the attached license application. Please review and confirm your approval and return back to the Town Manger's office (do not forward).

Name of applicant:	
Address:	
TOWN MANAGER'S OFFICE WILL OBTAIN SIGNATURES	
	Approve
Fire Chief- Premises have passed all fire safety inspections: Signature and Comments:	□ Yes □ No
Building Inspection- Premises have passed all building safety inspections: Signature and Comments:	□ Yes □ No
Zoning Department-Premises meetzoning regulations (Fornew Licenses): Signature and Comments:	□ Yes □ No
Treasurer/Collector- Real estate, Personal Property, Water/Sewer/Trash are current: Signature and Comments:	□ Yes □ No
Board of Health-Proper Permits obtained and food safety inspections passed: Signature and Comments:	□ Yes □ No
Police Department-Application reviewed: Signature and Comments:	□ Yes □ No
Town Clerk - Business Certificate, if applicable Signature and Comments:	□ Yes □ No
Assessor Office - Notify assessor of new business Signature and Comments:	□ Yes □ No
Town Manager- Application reviewed and manager check completed: Signature and Comments:	□ Yes □ No